Name in Full | Certificate of Death

Jamer N. Bowers

Died at Town: Near Still Pond | County: Kent Co | MARYLAND

Date 1897 | Month: Sept | Day: 20 | Age: Y. 7 M. 1 D. 10 | Native of: Md | Occupation:

Male | ~~White~~ | ~~Married~~ | ~~Widow~~ | ~~Divorced~~

~~Female~~ | Colored | Single | ~~Widower~~ | ~~Number of children living~~

Husband / Wife of

Father's Name: Nathan Bowers | Mother's Name: Annie Bowers

Cause of Death: Primary: Colic | How long sick: on day

Immediate | Accident, Suicide, Homicide

161

Reported by: W. H. Krusen Undertaker

Address: Still Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

Mary Ann Butler.

Certificate of Death

Died at Town: Worton County: Kent MARYLAND

Date 189 9 Month: Sept. Day: 22" Age Y. 65 M. D. Native of Kent Co. Occupation None

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living Five

~~Husband~~ Wife of Samuel Butler, colored

Father's Name — Hamilton Mother's Name —

Cause of Death: Primary Asthma 76 How long sick —

Immediate Dropsy ~~Accident, Suicide, Homicide~~

Reported by John N. Dodd, Undertaker

Address Chestertown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70578

Attended by Drs. Whaland & Simmons
of Chestertown
and Dr. Henry of Hanesville,
Kent Co. Md.
at different times.

Information contained in this certificate
ceived from Richard Leeney, Cold'd.
of Worton, Kent Co. Md.

Name in Full

Certificate of Death

Geo. H. Cannan

Died at Town Chestertown County Kent MARYLAND

Date 189 9 Month 9 Day 18 | Age Y. 63 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 6

Husband of Wife

Father's Name

Mother's Name

Cause of Death { Primary Jaundice 92 / Immediate

How long sick

Accident, Suicide, Homicide

Reported by Transcript 9-21

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Rev. J. M. Mills & Dr. S. C. Roberts

Chester Cemetery.

Name in Full

Certificate of Death

Wm. H. Coleman

Town

County

Died near Rock Hall Kent MARYLAND

Month Day | Y. M. D. | Native of | Occupation

Date 189 9 9 14 | Age 71

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 8

Husband of

Wife

Father's Name

Mother's Name 57

Cause of Death { Primary Heart disease | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Transcript 9-21

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79998

Elder A. H. Kerrel.

Name in Full

Certificate of Death

Mary Anne Downey

Died at Town: Rock Hall County: Kent MARYLAND

Date 189 9 Month: Sept Day: 5

Age Y. 85 M. 6 D. —

Native of Maryland

Occupation Housewife

~~Male~~ Female

White ~~Colored~~

~~Married~~ ~~Single~~

Widow ~~Widower~~

~~Divorced~~

Number of children living 2

Husband / Wife of William Downey

Father's Name Joseph Linton

Mother's Name Elizabeth Benton

Cause of Death

Primary Diarrhoea & 3

How long sick 3 weeks

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Certificate of Death

Mary Elizabeth Elburn

Died at Town: Rock Hall County: Kent MARYLAND

Date 1899 Month: Sept Day: 13- | Age Y. M. D.: 2 weeks | Native of: Maryland | Occupation:

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~ 3

Husband / Wife of ~~John W. Elburn~~

Father's Name: John W. Elburn Mother's Name: Nelly C. Elburn

Cause of Death: Primary: Spinal Abscess 140 How long sick: 7 days

Immediate: ~~Accident, Suicide, Homicide~~

Reported by L. J. Williams

Address Edesville R.F.D. Kent Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79705

Name in Full | Certificate of Death

Hannette Adelaide Fowler

Died at Town: Chestertown | County: Kent | MARYLAND

Date 1899 | Month: 25 | Day: Wed | Age: Y. 64 M. 9 D. 10 | Native of: Kent | Occupation: Housewife

~~Male~~ | White | Married | ~~Widow~~ | ~~Divorced~~

Female | ~~Colored~~ | ~~Single~~ | Widower | Number of children living 7

~~Husband~~ Wife of Lewin S. Fowler

Father's Name: Wm Frazier | Mother's Name: Sarah E Redna

Cause of Death: Primary ~~Exhaustion~~ Porosis 45 | How long sick 6 m

Immediate Exhaustion | ~~Accident, Suicide, Homicide~~

Reported by W Frank Harris

Address

Must be signed by physician, if any in attendance, otherwise coroner, undertaker or minister.

LIBRARY BUREAU, 66968

Name in Full

James Fowler

Certificate of Death

Died at Town Hanesville County Kent MARYLAND

Date 1899 Month Sept Day 14 Age Y. 72 M. 6 D. 10 Native of Kent Md Occupation Retired

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 7

Husband of Wife Sarah C. Fowler

Father's Name Thomas Fowler Mother's Name Elizabeth Fowler

Cause of Death Primary Bright Disease 97 How long sick One week

Immediate Paralysis ~~Accident, Suicide, Homicide~~

Reported by John H. Hessey MD

Address Hanesville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Certificate of Death

Wm Goslin

Died at Town: Near Still Pond County: Kent Co MARYLAND

Date 1899 Month Sept Day 15 | Age Y. 40 M. - D. - | Native of Germany | Occupation labour

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ Divorced | Number of children living one

Husband / Wife of do not Know

Father's Name unknown

Mother's Name Unknown

Cause of Death — Primary: Alchoalic Excess — How long sick: two months

Immediate: Consumption — Accident, Suicide, Homicide

Reported by Wm H Krusen Undertaker

Address Still Pond Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

attended By Dr. J. W. Mio
Still Pond md

and Dr J. Irvan Barwick
Kennedyville
md

Name in Full

Certificate of Death

Ella Valeria Joiner W

Died at Town: Rock Hall County: Kent MARYLAND

Date 1899 Month: Sept Day: 13 | Age Y.: 18 M.: 6 D.: | Native of: Maryland | Occupation:

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name: John M. Joiner

Mother's Name: Amelia B. Joiner

Cause of Death: Primary: Malarial Fever 19

Immediate: Uremia

How long sick: 3 Weeks

~~Accident, Suicide, Homicide~~

Reported by: D B Wilson

Address: Edesville Kent Co, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full — Certificate of Death

John Henry Jones.

Died at Town: Still Pond — County: Kent — MARYLAND

Date 189 — Month: 9 — Day: 1 — Age: Y. M. D. — Native of: Md. — Occupation: Laborer.

Male / ~~Female~~ — ~~White~~ / Colored — Married / ~~Single~~ — Widow / ~~Widower~~ — ~~Divorced~~ — Number of children living: 12.

Husband / ~~Wife~~ of: Martha Jones

Father's Name: —

Mother's Name: Martha Jones.

Cause of Death — Primary: —

Immediate: Peritonitis. 93

How long sick: 7 days.

~~Accident, Suicide, Homicide~~

Reported by: W. S. Maxwell.

Address: Still Pond, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78708

Name in Full #5520 Certificate of Death

Ernie Letter

Died at Town Lynchee County Kent Co. MARYLAND

Date 189 4 Month Sep Day 12 Age Y. M. D. 14 Native of Balto. Occupation non

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name William Letter Mother's Name Agie Letter

Cause of Death Primary Collier in fantum How long sick 4 days

Immediate 82 Accident, Suicide, Homicide

Reported by Jas W. Urie M.D.

Address Still Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 85968

Name in Full — Certificate of Death

Catharine A. Price ✓

Died at Town: Still Pond. County: Kent; MARYLAND

Date 1899 Month	Day	Y.	M.	D.	Native of	Occupation
9.	24	Age 80			Md.	

~~Male~~ / White / ~~Married~~ / Widow / ~~Divorced~~

Female / ~~Colored~~ / ~~Single~~ / ~~Widowed~~ / Number of children living 2

~~Husband~~ Wife of Levin Price.

Father's Name Jemer Bevins — Mother's Neme Ann Bevins.

Cause of Death — Primary: 141 — How long sick

Immediate: General debility.

Accident, Suicide, Homicide

Reported by W. S. Maxwell.

Address Still Pond, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78706

Name in Full

Certificate of Death

Edward W. Rodney

Died at Rock Hall (Town) Kent (County) MARYLAND

Date 189 9 Month Sept. Day 25 | Age Y. 51 M. D. | Native of Maryland | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 7

Husband / Wife of Henretta Rodney

Father's Name John Rodney | Mother's Name Joanna Rodney

Cause of Death — Primary: Dysentery 84 | How long sick: 10 days

Immediate: Abscess of Liver | ~~Accident, Suicide, Homicide~~

Reported by L. B. Wilson

Address Edwardsville Kent Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78706

Name in Full

Certificate of Death

Wm Thomas Sewell

Died at Town: Rock Hall County: Kent MARYLAND

Date 189 9 Month: Sept Day: 26 | Age Y. 8 M. 3 D. | Native of Baltimore Md. | Occupation ——

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living none

Husband / Wife of

Father's Name Samuel D. Sewell

Mother's Name Annie G. Sewell

Cause of Death — Primary: Remittent Fever — How long sick: 7 days

Immediate: 154 — Accident, Suicide, Homicide

Reported by J. B. Wilson

Address Edesville Kent Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full: Marion B. Slaughter

Certificate of Death ✓

Died at Town: Forest Grove County: Kent Co MARYLAND

Date 1899 Month: 9. Day: 20 | Age Y. 38 M. D. | Native of: Md | Occupation: Fisherman

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of Sadie E.

Father's Name

Mother's Name 96

Cause of Death: Primary: Acute Parenchymatous Nephritis — How long sick: Week

Immediate: Oedema of Lungs — ~~Accident, Suicide, Homicide~~

Reported by Dr. H. Pyfer & J. Wm. Latimer

Address Forest Grove & Galena

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Daniel Smith

Died at Town Chestertown County Kent MARYLAND

Date 189 Month 9 Day 7 | Age Y. 71 M. D. | Native of | Occupation shoemaker

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | Widow Widower | Divorced

Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death { Primary Kidney trouble 100 | immediate

How long sick

Accident, Suicide, Homicide

Reported by Transcript 9-21

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full: John D. Tucker

Certificate of Death

Died at: Near Kennedyville (Town) Kent (County) MARYLAND

Date 1899: Month Sept Day 24 | Age Y. 57 M. – D. – | Native of Md | Occupation Overseer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of

Father's Name: John Tucker

Mother's Name: Mary Burrer

Cause of Death: Primary Heart Failure

Immediate

How long sick: one day

57

Accident, Suicide, Homicide

Reported by: W H Kruser Undertaker

Address: Still Pond Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85968

attended Mrs Dr. G. Irvin Barwick
Kennedysville
Md

Name in Full

Certificate of Death

Mrs. Mary Elizabeth Wheatley

Died at Town: Edesville County: Kent MARYLAND

Date 1899 Month: 9 Day: 23 | Age Y. 97 M. D. | Native of | Occupation

Male / Female — White / Colored — Married / Single — Widow / Widower — Divorced — Number of children living

Husband / Wife of W. J. Franklin Wheatley

Father's Name

Mother's Name

Cause of Death — Primary: 161

Immediate

How long sick

Accident, Sulcide, Homicide

Reported by Enterprise 9-27

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 7989$

Name in Full William H Whitely

Certificate of Death ✓

Died at Town Chestertown County Kent MARYLAND

Date 1899 Month 9 Day 20 Age Y. 1 M. 8 D. — Native of Kent Occupation —

Male ~~Female~~ White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife — — — — — —

Father's Name W. J. H. Whitely

Mother's Name Maurice Kirby

Cause of Death: Primary Entero-Colitis 82 — How long sick Several weeks

Immediate Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by W. Frank Hines

Address Chestertown Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Jerome N. Wilmer

Certificate of Death

Died at Town Hebron Sta County Kent MARYLAND

Date 1899 Month Sep Day 4 Age Y. — M. — D. 9 Native of Md Occupation —

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ Number of children living

Husband of Wife

Father's Name Edw Wilmer

Mother's Name Annie A Johnston

Cause of Death Primary

Immediate Convulsions

How long sick 4 days

Accident, Suicide, Homicide

Reported by W H Kruser

Address Still Pond Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Attended Br
J W Kric Md.
Stell Pond
Md